MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.	FILING DATE
10/562,935	
APPLICANT(S)	

CLAIMS

	AS FILED IND.	AS FILED DEP.	AFTER 1st AMENDMENT IND.	AFTER 1st AMENDMENT DEP.	AFTER 2nd AMENDMENT IND.	AFTER 2nd AMENDMENT DEP.
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TOTAL IND.	2					
TOTAL DEP.	10					
TOTAL CLAIMS	12					

	AS FILED IND.	AS FILED DEP.	AFTER 1st AMENDMENT IND.	AFTER 1st AMENDMENT DEP.	AFTER 2nd AMENDMENT IND.	AFTER 2nd AMENDMENT DEP.
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TOTAL DEP.						
TOTAL CLAIMS						